

**REPORT TO THE TWENTY-SECOND LEGISLATURE  
STATE OF HAWAII  
2004**

**PURSUANT TO SECTION 334-10 (e), HAWAII REVISED STATUTES,  
REQUIRING THE DEPARTMENT OF HEALTH TO SUBMIT AN  
ANNUAL REPORT TO THE GOVERNOR AND THE LEGISLATURE ON  
IMPLEMENTATION OF THE STATE PLAN FROM THE HAWAII STATE COUNCIL  
ON MENTAL HEALTH**

**AND**

**PURSUANT TO THE HAWAII ADMINISTRATIVE RULES, TITLE 11,  
DEPARTMENT OF HEALTH, CHAPTER 175, 11-175-03(b) (ATTACHMENT B),  
REQUIRING THE DEPARTMENT OF HEALTH TO SUBMIT AN ANNUAL REPORT**

**PREPARED BY:  
STATE OF HAWAII  
DEPARTMENT OF HEALTH  
JANUARY 2004**

HAWAII STATE COUNCIL ON MENTAL HEALTH  
ANNUAL REPORT TO THE GOVERNOR AND LEGISLATURE  
Legislative Session 2004

This annual report is in response to HRS 334-10 (e): “The council shall prepare and submit an annual report to the governor and the legislature on implementation of the State plan. The report to the legislature shall be submitted at least ten days prior to the convening of each regular session” (Attachment A).

This annual report is also in response to Hawaii Administrative Rules, Title 11, Department of Health, Chapter 175, 11-175-03 (b) (Attachment B).

I. Advise the Department on Statewide Needs

The State Council conducts independent monitoring of State public and purchase of service providers. Site visit monitoring to Hawaii’s four counties includes programs, Service Area Board meetings, and interviewing families and consumers. Written and oral Reports of Findings are submitted to the State Council addressing service needs and gaps. State Council minutes and these reports reflect recommendations for performance improvement.

A. Adult (Adult Mental Health Division, AMHD)

Other needs recognized by the State Council in the course of their monthly meetings include:

- Transition from hospital to community and discharge planning.
- Emergency walk-in capacity at CMHCs.
- Persons living in poverty not qualified for Medicaid.
- Special needs of chronically homeless persons.
- Lack of services for transitioning adolescents.
- Consumer access to the service delivery system.
- Revolving door of homelessness, misdemeanors, and hospital admissions.
- Determination of the number of acute care beds needed in the State.

B. Child (Child and Adolescent Mental Health Division, CAMHD)

- Early intervention for transition from preschool to kindergarten.
- Services gap for Developmentally Disabled children with autism and higher IQ scores.
- Provide equitable caseloads, especially in rural areas.
- Address high numbers of adolescents at Hilo Emergency Room.
- Ensure medication monitoring.

## II. Review Services, Statistics and Other Information

The Plan for Community Mental Health services requires that the County Service Area Boards, represented on the State Council, participate in the formulation of the County Comprehensive Integrated Service Area Plans (CISAPs) on Mental Health. The four CISAPs are then integrated into the Statewide Comprehensive Integrated Service Plan (SCISP). The draft SCISP is reviewed by the State Council consistent with state (HRS, 334-0 (c)) and federal (P.L. 106-310). mandates. This includes reviewing the guiding cross-cutting principles, cultural competence, recovery, evidence-based practices, service definitions level of care criteria, service background, integration of services, partnering, MIS needs, budgeting, and goals, objectives and performance indicators of the system.

### A. Adult

- Review Service Area Plans
- Review County Service Grids.
- Review County Plans (CISAPs).
- Review of annual State Plan (SCISP).
- Review of annual Implementation Report of the State Plan.
- President's New Freedom Commission on Mental Health publication, distribution, and focused discussions.
- Review monthly Chief's Report on Implementation of Services.
- Review AMHD anti-stigma Public Service Announcement videos.
- Special Session with the AMHD Chief on "Navigating the Way", an overview of the new AMHD organizational structure.
- Hawaii Health Survey Suicide Report.
- Review of SAMHSA publication on co-occurring disorders.
- Report from Medicaid, DHS, on qualification process.

### B. Child and Adolescent

- Review reports on caseloads at CAMHD Family Guidance Centers.
- Medicaid Review of CAMHD Quest Program.
- Juvenile Justice Plan.
- Quarterly reports on sustainability.
- Review of results of Performance Indicators.
- Monthly Reports from State Council DOE Representative on Implementation of School-Based Behavioral Health (SBBH).

### III. Advise Department on Allocation of Funds and Resources

#### A. Adult

- Review of the four County Plans (CISAP) and the Seven Statewide Service Plans (SSPs) and the State Comprehensive Integrated Service Plan (SCISP) for expansion of core services and ensure core service funding in all 4 counties.
- Recommended increasing anti-stigma Block Grant funds.
- Review AMHD budget request for 2003 legislature.

#### B. Child and Adolescent

- Provided input that Block Grant fund increases be utilized to include services that will assist the transition population.
- Funding for acute care for children on the Big Island that now requires being medi-vac'd to Oahu.

### IV. Review and Comment on the State Plan

- State Council letter in support of the SCISP.
- State Council letter in support of the Implementation Report.

Draft State Plans and Implementation Reports from the CAMHD and AMHD are reviewed by Council members for Adults with Serious and Persistent Mental Illness and Children with a Serious Emotional Disturbance and provide feedback to the Chairperson of the State Council. The Chairperson incorporates Council input in the submittal letters for the State Plan and Implementation Report.

### V. Advocacy Activities

#### A. Adults with Severe and Persistent Mental Illness

- Mental Health Parity legislation.
- Advanced Directives legislation.
- Policy Academy for the Chronically Homeless.
- Non-emergency dental services.
- Drug court to assist persons with mental illness.

#### B. Children and Adolescents with a Serious Emotional Disturbance

- Monitoring progress of children transferred from the DOH, CAMHD to the DOE, School-Based Behavioral Health.
- Mental Health resources for teachers.
- Services for transitioning adolescents.
- DOE Children in School-Based programs need day treatment.

- Autistic Children who do not qualify for services in DOH's Developmental Disabilities Division.
- Need for a substance abuse treatment facility in the Hilo area (ice).

#### VI. Council's Activities Regarding Implementation of the State Plan

- Assess progress and develop Implementation Report, including three national mental health performance indicators for employment/days in school, independent living/out-of home placement, and contact with the criminal justice system (arrests and jailed)/juvenile justice.
- Participate in ongoing monitoring of the Plan for Community Mental Health Services with AMHD chief, Court Evaluation Team and AMHD consultants and staff.

#### VII. Programs Effecting Two or More Service Areas.

A focus for two major service areas and new initiatives is 1) Mental Illness and Substance Abuse (MI/SA) and 2) Forensics. These two program areas cut across all core service areas, affecting the implementation and integration of the delivery of services.

- Presentation by the Statewide MI/SA Service Director on AMHD's planned system and capacity development to address statewide needs.